Application No.: 10/705,282

Response to Office Action Mailed August 7, 2008

Date: February 9, 2009

REMARKS/ARGUMENTS

Status of the Claims

Claims 40-55 are pending in this application. Claims 1-39 are cancelled.

Claim Rejections - 35 USC § 112 first paragraph

Claims 40-43 were rejected as failing to comply with the written description requirement for using the terms "solvate or co-crystal". Applicants have deleted the terms "solvate and co-crystal" from claim 40 and claims 41-43 depend from claim 40. Applicants also have cancelled claims 53-55 for the use of the term "solvate". Applicants respectfully request that the Examiner reconsider and withdraw the rejection based on failure to comply with the written description requirement.

35 USC § 112 first paragraph

Claims 40-55 were rejected for not being enabling for an in vivo treatment for acute coronary syndrome. The Examiner pointed out that Applicant has exemplified an exvivo anti-platelet aggregation test model, but not an in vivo treatment for acute coronary syndrome. Applicants request that the Examiner reconsider since a person of skill in the art of cardiology would know that the acute coronary syndrome has the clinical symptoms of myocardial ischemia, or chest pain due to insufficient blood supply to the heart muscle that results from coronary artery disease. Platelet aggregation results in such insufficient blood supply to the heart muscle and an anti-platelet aggregation treatment as exemplified in U.S. pat. No. 7,304,078 at col. 54, lines 47-61, as pointed out by the Examiner treats such a condition. Such a test model would enable a skilled cardiologist to use the compound of the present invention to treat a patient suffering from acute coronary syndrome and experiencing clinical symptoms of myocardial ischemia, or chest pain due to insufficient blood supply to the heart muscle. A skilled cardiologist would also know that it is part of the ordinary requirements to determine a particular treatment regimen for a particular patient with specific characteristics and the anti-platelet test model is sufficient to enable a skilled cardiologist to use the compound to treat a patient suffering from acute coronary syndrome. Thus, Applicants sincerely

Application No.: 10/705,282 Response to Office Action Mailed August 7, 2008

Date: February 9, 2009

request reconsideration and withdrawal of the rejection based on lack of enablement of a treatment for acute coronary syndrome.

Nonstatutory Obvious-type Double Patenting

Claims 40-55 were rejected on the grounds of nonstatutory obvious-type double patenting over claims 19-29, 31-34, 36-39, 41-44, 46-49, 51-54, 56-59, and 61-67 of U.S. Pat. No. 7,304,078 in view of Gerlitz et al. (U.S. 2003/0022354). Applicants are timely filing a terminal disclaimer in compliance with 37 CFR 1.321(a) in order to overcome the double patenting rejection. Applicants respectfully request that the Examiner withdraw the rejection based on nonstatutory obviousness-type double patenting.

In view of the above, Applicants submit that the application is in condition for allowance, which allowance is earnestly sought.

Dated: February 9, 2009

SCHERING-PLOUGH CORPORATION Patent Department, K-6-1, 1990 2000 Galloping Hill Road Kenilworth, NJ 07033-0530 (908) 298-5388 (Facsimile) Respectfully submitted,

Serena Farquharson-Torres

Reg. No.: 54,093 Attorney of Record

Telephone No.: (908) 298-2902